

# IE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Ryoichi Hashida, Shinji Kagaya, Yuji Sugita and Hirohisa Saito

Application No.:

10/611,310

Group:

1647

Filed:

July 1, 2003

Examiner:

Cherie M. Chappell

Confirmation No.:

3981

For:

METHODS OF TESTING FOR ALLERGIC DISEASES AND

THERAPEUTIC AGENTS FOR TREATING SAME (AS AMENDED)

#### CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

Typed or printed name of person signing certificate

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been [] established by a Small Entity Statement previously submitted.
- A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and [ ] 1.27 is enclosed.

-02/07/2006\_REEKADU1-00000004\_10611310

01\_FCx1251

## The claims fee has been calculated as shown below:

						 	SMA
	CLAIMS REMAINING AFTER AMENDMENT		PRE	HEST NO. VIOUSLY ID FOR	PRESENT EXTRA	R	ATE
TOTAL	4`	MINUS	*	53		х	\$ 2
INDEP	1	MINUS	**	12		x	\$10
	FIRST PRESENTA	ATION O	F MUI	TIPLE DE	P. CLAIM	+	\$18

SMALL ENTITY						
	R	ATE	ADDIT. FEE	<u>o</u>		
	x	\$ 25	\$			
	x	\$100	\$			
	+	\$180	\$			

_	SMALL ENTITY							
<u> </u>	RATE		ADDIT. FEE					
	х	\$50	\$	0				
	x	\$200	\$	0				
Ì	+	\$360	\$					

**OTHER THAN** 

- \* not fewer than 20
- \*\* not fewer than 3

OTAL= \$ 0

TOTAL= \$ \_\_\_\_\_0\_\_

# The Application Size Fee has been calculated as shown below:

(Effective for cases filed on or after December 8, 2004)

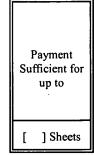
(1	tual Sheets Including current nendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)

	SMALL	ENTIT	Y
_	T		_

Rate	Total Amount Owed
X \$125	<b>\$</b> [ ]

OTHER THAN
SMALL ENTITY

SWALL ENTITY					
Rate	Total Amount Owed				
X \$250	<b>\$</b> [ ]				



### **Petition for Extension of Time**

- [X] Applicant hereby petitions to extend the time to respond to the Office Action dated August 4, 2005 for three months from November 4, 2005 to February 4, 2006. The appropriate fee is set forth below.
- [ ] [For action-specific language in an extension of time, go to insert, file, public folders, firm templates, and select the appropriate paragraph.]

Please ch	arge Deposit Account l	No. 08-0380 for the following fees:		
[ ]	Petition for [	] month Extension of Time	\$	
[ ]	Claims Fee		\$	
[ ]	Application Size Fee		\$	
[ ]	Other Fees:			
			\$	
			\$	
		TOTAL:	\$	0
A check i	s enclosed in payment	of the following fees:	٠	
[X]	Petition for three mont	h Extension of Time	\$	1020
[ ]	Claims Fee		\$	
[ ]	Application Size Fee		\$	
[ ]	Other Fees:			
			_ \$	
			_ \$	
		TOTAL:	\$	1020
mat		y or credit any overpayment in the fees that may be No. 08-0380. A copy of this letter is enclosed for acceptable and the sepectfully submitted,  HAMILTON, BROOK, SMITH & REYNOLDS,  By Manual	ecounting	
Concord, M	lassachusetts 01742-913	33		

Concord, Massachusetts 01742-913 Dated: Fibruary 3, 2006